Ple	ease print or type. (Form designed for use on el					i				
A	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA CAX0000.3251		fanifest ument No.	2. Page of	is not law.	ion in th	e shaded ar d by Fede	eas	
	3. Generator's Name and Mailing Ad Center Line 1001	dress			A.State	Manifest Do	7	Number		
1	3521 Freeway Dr. Santa Fe Springs, CA	90670				Generator's	ID			
11	4. Generator's Phone ()	213-92	21-9637		CAX	0000325	16			
	Acto Kleen Co. CAD095631719			D.Transporter's Phone 213 723-511						
H	7. Transporter 2 Company Name	11000 1120011 001			E.State Transporter's ID					
П						porter's Phor			-	
	9. Designated Facility Name and Site Address Omega Chemical Corp. 12504 E. Whittier Blvd.						01			
	Whittier, CA 90603 CAD042245001					H.Facility's Phone 213 698-0991				
G	11. US DOT Description (Including Propa	r Shipping Name, Hazard C	iass, and ID Number	12.Conta	Type	13 Total Quantity	14. Unit Wt∕Vol	I. Waste N	о.	
ENER	WASIE-EA-FERCHLOREI	CHYLENE-ORM-A (JN 1897	10	DM	495 5 50	G	211	ų.	
A T O R										
1	C.								100	
	d.									
	J. Additional Descriptions for Materials Listed Above K.Handling Codes for Wastes Listed Above									
	15. Special Handling Instructions and					The state of the s				
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.									
	Printed/Typed Name	Te	Signature		_	-	M	Date onth Day	Year	
V	Taxa CAMPA		(ter	(2	- 10		_	2/201		
-	17. Transporter 1 Acknowledgement of Receipt of Materials							Date		
TRANSPORTER	Printed/Typed Name Richard Lipton Signature Ruchard Lipton							onth Day	Year &6	
OR	18. Transporter 2 Acknowledgement or			1				Date		
T E R	Printed/Typed Name		Signature					onth Day	Year	
FACILI	19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest excellent 19.							, ''' _	Date		
	Printed/Typed Name , Signature					/		onth Day	Year	
	2/01/ D'/MA		SIE	01	PHA	j .	X	22/	86	

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